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(Depositor's name)	BALPH E LACHED
(Signature)	359 10, 41 947
(Date)	November 24, 2004

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/718,310	11/20/2003	Bernhard Kowalski	MUH-12876	9766

TITLE OF INVENTION: TRANSISTOR ARRAY AND SEMICONDUCTOR MEMORY CONFIGURATION FABRICATED WITH THE TRANSISTOR ARRAY

APPLN, TYPE	SMALL ENTITY	ISSUE FI	FEE PUBLICATION FEE TOTAL		TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$133 0	11370	\$300	\$1630	4,670	11/26/2004
EXA	MINER	ART UN	IT	CLASS-SUBCLASS]		
HO, T	U TU V	2818		257-302000			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the na or agents (2) the na registered 2 registered	nting on the patent front page, list mes of up to 3 registered paten OR, alternatively, me of a single firm (having as a attorney or agent) and the named patent attorneys or agents. If name will be printed.	at attorneys a member a 2 less of up to		e A. Greenberg H. Stemer L. Mayback

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Infineon Technologies AG	Muenchen,	Germany		
Please check the appropriate assignee category or categories (will not be	printed on the patent):	☐ Individual	Corporation or other private group entity Government	
4a. The following fee(s) are enclosed:	4b. Payment of Fee(s):		-	
Ssue Fee	A check in the ar	nount of the fee(s) is enclosed.	
Publication Fee (No small entity discount permitted)	Payment by credit card. Form PTO-2038 is attached.			
Advance Order - # of Copies	The Director is I Deposit Account Nu	mereby authorized	by charge the required fee(s), or credit any overpayment, to 1099 (enclose an extra copy of this form).	
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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.	D b. Applicant is no	longer claiming	SMALL ENTITY status. See 37 CFR 1.27(g)(2).	
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Authorized Signature Typed or printed name

RALPH E. LOCHER REG. NO. 41,947

11/24/04

Registration No. .

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